

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101586,032

FILING DATE

7-13-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		2			
2		-				
3	2					
4	0					
5	0					
6	0					
7						
8	0					
9	-					
10	1					
11	-					
12	0					
13	0					
14	-					
15	0					
16	0					
17						
18	0					
19						
20	0					
21	0					
22	0					
23	0					
24	0					
25	-					
26	1		2			
27	1		2			
28		1				
29			1			
30			1			
31			1			
32			1			
33			1			
34			1			
35			1			
36			1			
37			1			
38			1			
39			1			
40			1			
41			1			
42			1			
43			1			
44			1			
45			1			
46			1			
47			1			
48			1			
49			1			
50			1			
TOTAL IND.	2		2			
TOTAL DEP.	26	←	26	←	26	←
TOTAL CLAIMS	28	↓		↓		↓

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51					1	
52					1	
53					1	
54					1	
55					1	
56					1	
57					1	
58						
59						
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.					2	↓
TOTAL DEP.	26	←	26	←	28	←
TOTAL CLAIMS	28	↓		↓	30	↓